

O I P E

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(MON) 8.31.09 13:43/ST. 13:42/NO. 4862190364 P 2

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Thomas M. Sossong	(Depositor's name)
<i>Thomas M. Sossong</i>	(Signature)
8-31-09	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/590,248	04/26/2007	Simon W. Bayloff	101713-5024	6950

TITLE OF INVENTION: DIAGNOSTIC TEST DEVICES

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1510	\$300	\$0	\$1810	09/14/2009

EXAMINER	ART UNIT	CLASS-SUBCLASS
NGUYEN, BAO THUY L	1641	436-514000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list  
 (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  
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*Morgan, Lewis & Bockius, LLP*

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

SYSTAGENIX WOUND MANAGEMENT (US), INC.

Wilmington, DE

Please check the appropriate assignee category or categories (will not be printed on the patent):  Individual  Corporation or other private group entity  Government

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a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.  
 b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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48,463

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